13837/0

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### **FORM D**

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

!	OMB APPROVAL OMB Number: 3235–0076 Expires: April 30, 2008 Estimated average burden hours per response	
	07044769	

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Issuance of Series A Preferred Stock and the underlying Common Stock issuable upon co	
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE SEIVED
Type of Filing: New Filing 🔀 Amendment	MAD 2
A. BASIC IDENTIFICATION DATA	4 0 2007
Enter the information requested about the issuer	1801
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Flixster, Inc.	186 SECTION
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
208 Utah St., 4th Floor, San Francisco, CA 94103	415-509-5639
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	Same as above
Same as above	PROCESSE
Brief Description of Business	400F99F
Internet based site created to share movie ratings and reviews.	MAR 1 3 2007
Type of Business Organization	(4 - 1111 - 0 2007
corporation limited partnership, already formed othe	r (please specify):
business trust limited partnership, to be formed	FINANCIAL
Month Year	
Actual or Estimated Date of Incorporation or Organization:  0 6 0 5	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for	other foreign jurisdiction) D E

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

		A. BASIC IDENT	IFICATION DATA						
2. Enter the information re	equested for the foll								
• Each promoter of the issuer, if the issuer has been organized within the past five years;									
securities of the iss  • Each executive off		corporate issuers and of co	remorate general and manage	ing northers of no	rtnarchin iccuare, and				
		partnership issuers.	irporate general and manag	ing partners or pa	rulership issuers, and				
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	☐ Director	General and/or				
Oneon Don(es) mat rippiy.	2_3	Za perioritati o milor	Z chotanio cinica	Z Succion	Managing Partner				
Full Name (Last name first, i	•		· · · -						
Greenstein, Josep									
Business or Residence Addre									
<del></del>		Floor, San Francisco, CA							
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Chari, Saran									
Business or Residence Addre									
c/o Flixster, Inc.,	208 Utah St., 4 <sup>th</sup>	Floor, San Francisco, CA	. 94103						
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Braitman, Larry									
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)							
c/o Flixster, Inc.,	208 Utah St., 4th	Floor, San Francisco, CA	94103						
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Polsky, Steve									
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)	1		· · · · · · · · · · · · · · · · · · ·				
c/o Flixster, Inc.,	208 Utah St., 4 <sup>th</sup>	Floor, San Francisco, CA	94103		•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i	if individual)								
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)	)		<u> </u>				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first,	f individual)								
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)	)						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name fort	findividual)				ivianaging raither				
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
	ess (Mulliper, and 20	reet, City, State, Zip Code)							
	(Use blank s	sheet, or copy and use add	litional copies of this shee	t, as necessary.)	· · · · · · · · · · · · · · · · · · ·				

					B. INFOR	MATION	ABOUT O	FFERING				
												Yes No
1.	Has the iss	er sold, or d	oes the issu		-				_			
•	ord of all				• •		•	ng under U			631.	A C 11
2.	What is the	minimum in	vestment ti	nat will be	accepted to	om any ind	ividual?	••••••	***************************************	***************************************	\$ Not	
3.	Does the of	fering permit	joint own	ership of a	single unit	?		•••••				Yes No ⊠ □
		nformation r	-	=	_							
	commission If a person or states, li	or similar re to be listed i st the name o ealer, you ma	emuneratio s an associ f the broke	n for solic ated person r or dealer	itation of p n or agent of . If more t	ourchasers i of a broker han five (5)	n connection or dealer responsito	n with sales gistered wit be listed are	s of securition of the SEC a	es in the off nd/or with a	ering. i state	
Full l	•	name first, i plicable	findividual	1)								
Busir		idence Addre	ss (Numbe	r and Stree	et, City, Sta	ite, Zip Cod	e)					
					.,,	,,	-/					
Name	of Associ	ated Broker o	r Dealer		•		•					
State	s in Which	Person Liste	d Has Solic	ited or Int	ends to Sol	icit Purchas	sers					
(C	heck "All S	tates" or che	ck individu	al States)								☐ All States
[A]	_} [AK	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[][	.] [IN	] [IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M	T] [NE	] [NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[ R :	i] [SC	] [SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full 1	Name (Last	name first, i	findividua	l)								
Busii	ness or Res	idence Addre	ss (Numbe	r and Stree	et, City, Sta	ite, Zip Cod	le)					
Name	e of Associ	ated Broker o	or Dealer									
State	s in Which	Person Liste	d Has Solid	ited or Int	ends to Sol	licit Purcha	sers					·
(C	heck "All S	tates" or che	ck individu	al States).						• • • • • • • • • • • • • • • • • • • •		All States
[AI	.] [AK	.] [AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[10]
[][	,] [IN	] [IA]				[ME]						. ,
[M			[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[0H]	[OK]	[OR]	[PA]
[R	[SC	] [SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR]
Full 1	Name (Las	name first, i	f individua	l)								
Busii	ness or Res	idence Addre	ss (Numbe	r and Stree	et, City, Sta	nte, Zip Cod	le)					
Name	e of Associ	ated Broker o	or Dealer				<u> </u>	<del></del>				
<u> </u>		D 7.			1 . 7						·· ·	
		Person Liste states" or che						•••••				All States
[A]	.] [AK	.] [AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11	-		[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M	T] [NE	] [NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ſR.	ıı ısc	ı (SD)	[TN]	[TX]	ruti	[VT]	[VA]	[WA]	[WV]	(WI)	fWY1	[PR]

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	Ag Of	ggregate Tering Price		Aı	nount Already Sold
	Debt	\$	0		S	0
	Equity	s	5,693,646.69	_	s_	4,253,798.13
	□ Common □ Preferred	-		_	_	, ,
	Convertible Securities (including warrants)	\$	See above		\$	See above
	Partnership Interests	\$	0		s –	0
	Other (Specify)	`- \$	0		 \$	0
	Total	_	5,693,646.69	_	\$_ \$	4,253,798.13
	Answer also in Appendix, Column 3, if filing under ULOE.	<b>"</b> -	3,073,040.07		<b>"</b> —	4,233,770.13
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors		Do	Aggregate Har Amount Purchases
	Accredited Investors	_	15		\$	4,253,798.13
	Non-accredited Investors		0		\$	0
	Total (for filings under Rule 504 only)		N/A		\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of offering		Type of Security		Do	llar Amount Sold
	Rule 505		N/A		\$	0
	Regulation A		N/A		\$	0
	Rule 504		N/A		s	0
	Total	_	N/A		s	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				<u>\$_</u>	
	Printing and Engraving Costs				\$	
	Legal Fees	······			\$_	
	Accounting Fees			X	\$ 	To be Determined
	Engineering Fees.				<u>\$_</u>	
	Sales Commissions (specify finder's fees separately)				\$	
	Other Expenses (identify)				\$	
	Total			X	<b>s</b>	To be Determined

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES A	ND USE	OF PROCEED	S	_	
	Ouestion 1 and total expenses furnished in re-	rate offering price given in response to Part C - esponse to Part C - Question 4.a. This differen	ce is the		s	5,	693,646.69
5.	used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or proposed e amount for any purpose is not known, furni ne estimate. The total of the payments listed suer set forth in response to Part C - Question	sh an		,		
				Payments to Officers, Directors, & Affiliates		Pa	ayments To Others
	Salaries and fees		□ \$	0		\$	0
	Purchase of real estate			0			0
	Purchase, rental or leasing and installati	on of machinery and equipment	□ s	0		\$	0
	Construction or leasing of plant building	gs and facilities	□ s	0		<b>s</b> –	0
	Acquisition of other business (including offering that may be used in exchange for issuer pursuant to a merger)	g the value of securities involved in this or the assets or securities of another	□ 5	0		_	0
			☐ \$	0	Ĭ	\$	0
	Working capital			0	×	s_	5,693,646.69
	Other (specify):						<del></del>
			<b>□</b> \$_	0		<b>s</b>	0
	Column Totals		□ <b>s</b> _	0	$\boxtimes$	s_	5,693,646.69
	Total Payments Listed (column totals ac	ided)	Ø	\$ <u>5,693,646.6</u>	9		
		D. FEDERAL SIGNATURE					<del></del>
IOI	e issuer has duly caused this notice to be sign lowing signature constitutes an undertaking by ts staff, the information furnished by the issuer	ned by the undersigned duly authorized perso	Frehand	ze Commission	י מסמוו	Ru writ	ile 505, the ten request
	uer (Print or Type)	Signature/	<del></del>	ate		_	. <u>.                                   </u>
	xster, Inc.	4//		arch 2,200	)7		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			•		····
	eph Greenstein	Chief Executive Officer					

## ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATUR	<u>E</u>	
ı.	Is any party described in 17 CFR 230.262 pr	esently subject to any of the disqual	lification provisions	Yes No
	of such rule?	·		``ĭ ⊠
	See Appendix	, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as require	o furnish to any state administrator ed by state law.	of any state in which this notice is filed a no	tice on Form
3.	The undersigned issuer hereby undertakes to offerees.	o furnish to the state administrators,	upon written request, information furnished	by the issuer
4.	The undersigned issuer represents that the Limited Offering Exemption (ULOE) of the this exemption has the burden of establishin	state in which this notice is filed a	ons that must be satisfied to be entitled to nd understands that the issuer claiming the a tisfied.	the Uniform
The	e issuer has read this notification and knows lersigned duly authorized person.	the contents to be true and has d	uly caused this notice to be signed on its b	behalf by the
Issu	ter (Print or Type)	Signature	Date	
Flü	ester, Inc.		March 2 , 2007	
Naı	ne (Print or Type)	Title (Print or Type)		
Jos	eph Greenstein	Chief Executive Officer		

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 pre	esently subject to any of the disqualification provision	ons Yes					
	of such rule?		······ \					
	See Appendix,	Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.							
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
The und	issuer has read this notification and knows ersigned duly authorized person.	the contents to be true and has duly caused this	notice to be signed on its behalf by the					
Issuer (Print or Type)		Signature	Date					
Flixster, Inc.		. ///	March 2 , 2007					
Nan	ne (Print or Type)	Title (What or Type)						
Joseph Greenstein		Chief Executive Officer						

		E. STATE SIGNATUR	£	
1.	Is any party described in 17 CFR 230.262	presently subject to any of the disqual	ification provisions	Yes No
	of such rule?			` <u>`</u> 🖾
	See Append	ix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes D (17 CFR 239.500) at such times as requi	to furnish to any state administrator ired by state law.	of any state in which this notice is filed	a notice on Form
3.	The undersigned issuer hereby undertakes to offerees.	to furnish to the state administrators,	upon written request, information furni	shed by the issuer
4.	The undersigned issuer represents that the Limited Offering Exemption (ULOE) of the this exemption has the burden of establishing	he state in which this notice is filed a	nd understands that the issuer claiming.	d to the Uniform the availability of
The	e issuer has read this notification and know dersigned duly authorized person.	vs the contents to be true and has d	uly caused this notice to be signed on	its behalf by the .
Issu	uer (Print or Type)	Signature	Date	
Fli	xster, Inc.		March 2 ,2007	
Naı	me (Print or Type)	Title Print or Type)		
Jos	eph Greenstein	Chief Executive Officer		

